

11 OCT 11 PM 3:56

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) <u>Dianne Feinstein</u>			2. Candidate's FEC Identification Number <u>S0CA00199</u>
(b) Address (number and street) <u>1801 Avenue of the Stars, #829</u>		<input checked="" type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code <u>Los Angeles CA 90067</u>		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
4. Party Affiliation <u>Democratic Party</u>	5. Office Sought <u>Senate</u>	6. State & District of Candidate <u>CA 00</u>	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).  
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) <u>Feinstein for Senate</u>
(b) Address (number and street) <u>1801 Avenue of the Stars, #829</u>
(c) City, State, and ZIP Code <u>Los Angeles CA 90067</u>

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

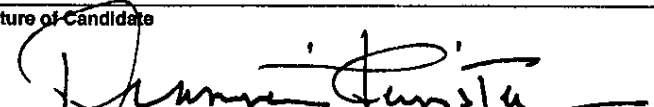
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) <u>Golden State Victory Fund 2012</u>
(b) Address (number and street) <u>120 Maryland Avenue, NE</u>
(c) City, State, and ZIP Code <u>Washington, DC 20002</u>

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate 	Date <u>October 5, 2011</u>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Date of Receipt

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	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
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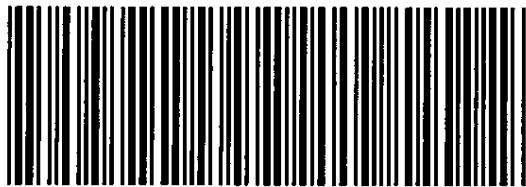
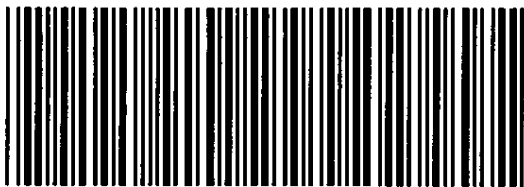
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